AMENDED IN SENATE JULY 22, 2003 AMENDED IN ASSEMBLY APRIL 29, 2003 AMENDED IN ASSEMBLY APRIL 21, 2003

CALIFORNIA LEGISLATURE—2003-04 REGULAR SESSION

ASSEMBLY BILL

No. 766

Introduced by Assembly Member Longville

February 19, 2003

An act to add and repeal Section 49452.6 of the Education Code, relating to pupil health.

LEGISLATIVE COUNSEL'S DIGEST

AB 766, as amended, Longville. Type 2 diabetes mellitus: pupil screening.

Existing law requires the governing boards of school districts to provide a scoliosis screening of every female pupil in grade 7 and every male pupil in grade 8, in accordance with specified guidelines.

This bill would establish a 3-year pilot program whereby the State Department of Education would be required to select one school district each from Kern County, Orange County, and San Bernardino County to any school district may to participate in the program and would require those participating school districts, in conjunction with the scoliosis screening, to screen pupils for the risk of developing type 2 diabetes mellitus. The bill would specify individuals who may perform and supervise the screenings, and would prescribe procedures for the screening process, including, but not limited to, compliance with standards and procedures developed by the State Department of Education. The bill would provide for parent or guardian notification

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of any pupil suspected of being at elevated risk of developing type 2 diabetes mellitus, as described in the bill.

The bill would require the school districts to report to the Legislature and the Governor by June 30, 2006, would repeal the pilot program on January 1, 2008, and would prescribe other, related matters.

By imposing new duties on school districts, the bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement, including the creation of a State Mandates Claims Fund to pay the costs of mandates that do not exceed \$1,000,000 statewide and other procedures for claims whose statewide costs exceed \$1,000,000.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to these statutory provisions.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes no.

The people of the State of California do enact as follows:

- 1 SECTION 1. The Legislature finds and declares all of the 2 following:
- (a) Middle school pupils with obesity, acanthosis nigricans, 3 ethnicity, and a family history of type 2 diabetes mellitus (DM2) 5 have metabolic abnormalities consistent with the insulin resistance syndrome and are therefore at risk of developing DM2.
 - (b) Inexpensive, noninvasive clinical screening of pupils at school can provide early detection and identification of pupils at risk for DM2.
- 10 SEC. 2. Section 49452.6 is added to the Education Code, to 11 read:

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- 12 49452.6. (a) A three-year pilot program is hereby 13
- established, whereby the State Department of Education shall select one school district each from Kern County, Orange County,
- and San Bernardino County to participate in the program. The 15
- department shall require those three school districts, in

established, whereby any school district may participate in the

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program if the cost of the school district's participation is covered with local funding. Participating school districts shall, in conjunction with the scoliosis screening performed pursuant to Section 49452.5, and subject to Section 49451, and in addition to 5 the physical examinations required pursuant to Sections 100275, 6 124035, and 124090 of the Health and Safety Code, provide for the screening of every female pupil in grade 7 and every male pupil in grade 8 for the risk of developing type 2 diabetes mellitus. In 9 selecting the particular school district within each of the three counties that will be selected to participate in the pilot program, the 10 11 State Department of Education shall attempt to select the school district whose pupil population has the highest risk of developing 12 13 type 2 diabetes mellitus. The screening shall be in accord with standards and procedures developed by the State Department of 14 Education in conjunction with the State Department of Health 15 Services' Diabetes Control Program, and adopted as regulations 16 17 by the State Board of Education. The screening shall be performed and supervised only by qualified supervisors of health as specified 19 in Sections 44871 to 44878, inclusive, and Sections 49422 and 20 49452.5, or pursuant to contract with an agency authorized to 21 perform these services by the county superintendent of schools of 22 the county in which the district is located pursuant to Sections 23 1750 to 1754, inclusive, and Section 49402, Section 101425 of the 24 Health and Safety Code, and guidelines established by the State 25 Board of Education. The screening shall be performed only by 26 individuals who supervise, or who are eligible to supervise, the 27 scoliosis screening and have been trained to conduct type 2 28 diabetes screening. 29

(b) The screening process shall be noninvasive and shall include, but shall not be limited to, the following:

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- (1) Measuring the height and weight of the pupil to calculate the pupil's body mass index.
- (2) Examining the pupil's neck for acanthosis nigricans, a dark pigmentation that may indicate a high insulin level.
- (3) Documenting the pupil's ethnicity, based on existing school records. Ethnicities that have the highest risk of developing type 2 diabetes mellitus include Latino, African American, Asian, American Indian, and Pacific Islander.
- (4) Considering whether the pupil's existing health records indicate a family history of type 2 diabetes mellitus.

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(c) In-service training shall be provided to any person who will be screening pupils for type 2 diabetes pursuant to this section, unless the person has a health care license that already qualifies him or her to perform that type of screening, and shall be conducted by appropriately licensed health care providers acting within the scope of their practice who have received specialized training in screening for the risk of developing type 2 diabetes mellitus.

- (d) No person screening pupils for the risk of type 2 diabetes mellitus pursuant to this section shall solicit, encourage, or advise treatment or consultation by that person, or any entity in which that person has a financial interest, for the risk of type 2 diabetes mellitus or any other condition discovered in the course of the screening.
- (e) The State Department of Health Services' Diabetes Control Program shall select and review all educational and notification materials to be sent to the parent or guardian of any pupil suspected of being at risk for developing type 2 diabetes mellitus. Each participating school district shall provide for the notification of the parent or guardian of any pupil suspected of being at elevated risk of developing type 2 diabetes mellitus, and the notification shall be provided by mail. The notification shall be culturally and linguistically appropriate, and shall include an explanation of the meaning of being at elevated risk of developing type 2 diabetes mellitus, the significance of exercise and weight control in preventing the development of it, information on aspects of the school environment that may contribute to obesity or type 2 diabetes, information on Medi-Cal, the Healthy Families Program, the Child Health and Disability Prevention Program, and other public services available for helping with prevention, and referrals for the pupil and the pupil's parent or guardian to appropriate community resources, which shall be provided pursuant to Sections 49426 and 49456. The State Department of Health Services' Diabetes Control Program shall identify and distribute to the State Department of Education information for parents on where health assessments and health care, including free and low-cost, may be obtained in communities across the state.
- (f) A pupil shall be considered at elevated risk of developing type 2 diabetes mellitus if the pupil's body mass index is above 85

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percent and the screening process conducted pursuant to subdivision (b) indicates that the pupil also meets one of the risk factors described in paragraphs (2) to (4), inclusive, of that subdivision.

- (g) No action of any kind in any court of competent jurisdiction may be filed against any individual authorized by this section to supervise or give a screening, by virtue of this section.
- (h) It is the intent of the Legislature that no participating healing arts licentiate use the screening program for the generation of referrals or for his or her financial benefit. The Legislature does not intend to deny or limit the freedom of choice in the selection of an appropriate health care provider for treatment or consultation.
- (i) Each school district that participates in the pilot program conducted pursuant to this section shall maintain data on the numbers of pupils screened and found to be at risk of type 2 diabetes. To the extent possible, the school shall subsequently communicate with the parent or guardian of a pupil found to be at elevated risk of type 2 diabetes in order to determine the interventions, if any, that the parent or guardian has provided for the pupil. The school district shall maintain this information for the purpose of evaluation and reporting to the Legislature. Each school district that participates in the pilot program shall report to the Legislature and the Governor by no later than June 30, 2006, regarding all of the following:
- (1) Its findings concerning the extent to which the pupil population served by that school district is at risk of developing type 2 diabetes mellitus.
- (2) How the data reported in paragraph (1) compare to previous assumptions about the extent to which the pupil population served by that school district is at risk of developing type 2 diabetes mellitus.
- (3) Data on whether parents or guardians of pupils suspected of being at risk for developing type 2 diabetes mellitus sought health eare any intervention as a result of the notification specified in subdivision (e).
- (j) Nothing in this section applies to, or in any way precludes, the screening of pupils for type 2 diabetes by any non-participating school district.

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(k) This section shall remain in effect only until January 1, 2008, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2008, deletes or extends that date. 4 SEC. 3. Notwithstanding Section 17610 of the Government 5 Code, if the Commission on State Mandates determines that this act contains costs mandated by the state, reimbursement to local 6 agencies and school districts for those costs shall be made pursuant to Part 7 (commencing with Section 17500) of Division 4 of Title 2 of the Government Code. If the statewide cost of the claim for 9 10 reimbursement does not exceed one million dollars (\$1,000,000), reimbursement shall be made from the State Mandates Claims 12 Fund.